

# THE FOCUS

A WISCONSIN ASSOCIATION OF SCHOOL BOARDS  
POLICY PUBLICATION

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## USE OF SCHOOL HEALTH ADVISORY COMMITTEES IN DISTRICT DECISIONMAKING

*"Our committee was established to support the development of healthy, resilient and successful learners, to show the connection between health and academic achievement, and to provide building ownership in comprehensive school health."*

*Sue Gardner,  
Comprehensive  
School Health  
Coordinator*

*Hayward  
Community  
School District*

School boards and administrators recognize that students cannot learn effectively without the foundations of health and safety, and are continually striving to provide a safe and healthy school environment for students and staff.

This is no easy task when the schools are being called upon by parents and others to deal with a multitude of health and safety issues - obesity, alcohol, tobacco and other drug abuse, asthma, allergies, diabetes, the bird flu and other communicable diseases, youth sexual activity, mental health problems, and violent and aggressive behavior to name only a few.

It is no wonder that school officials sometimes feel overwhelmed and ill-equipped to manage all of these complex health and safety issues. Some districts have found a way to address district health and safety issues in a thoughtful, comprehensive and efficient manner and that is through the use of a school health advisory committee.

A school health advisory committee provides a single access point for collaboration around health and safety issues. It allows a district to look at school health and safety issues in a comprehensive way rather than by piecemeal and reduces duplication of activities and conflicting activities and messages.

School health advisory committees can be utilized in districts large and small, rural and urban. The authorization and support

of the school board and/or administration, however, is needed for such committees to have the greatest impact on student health and safety. Such committees should also be structured in a way that works best for the district, keeping in mind community needs, interests and resources.

This issue of *The FOCUS* is intended to provide guidance on the establishment and use of school health advisory committees in district decisionmaking.

### ROLE AND PURPOSE OF COMMITTEE

A school health advisory committee is an advisory group representing various segments of the school and community that provides recommendations to the school board, administration and staff on health and safety policies, programs and activities that impact the schools. The committee is formed to give advice; it does not have any final decision-making authority.

It is important to clearly define the purpose and authority of the school health advisory committee prior to beginning work. What will the role of the committee be in district decisionmaking and what exactly will the committee be expected to do? Problems can occur when the role and responsibilities of the committee are not clearly understood by school officials and members of the committee.

The specific roles and responsibilities of school health advisory committees vary from district to district based on the needs and capacities of the schools and their communities. Some school health advisory committees are designed to address health education alone, while others are designed to address all components of a comprehensive school health program: (1) healthy school environment, (2) curriculum, instruction and assessment, (3) student programs, (4) adult programs, (5) pupil services, and (6) family and community connections. *(Refer to the "Policy Processes at Work" section of this publication for a list of some comprehensive school health-related policy topics.)*

When determining the role and responsibilities of the school health advisory committee, school officials should consider existing committees, councils and work groups in the district that are addressing school health and safety-related issues. For example, the Human Growth and Development Advisory Committee, District Wellness Committee, School Safety Committee, and Emergency Nursing Services Committee. These advisory groups often include many of the same individuals, address similar issues and have overlapping tasks. With the establishment of a general school health advisory committee, some or all of these committees, councils and work groups could be dissolved and their tasks re-assigned to the school health advisory committee. It should be a priority of the school health advisory committee to coordinate, complement and build on existing activities rather than compete with them.

Specific roles and responsibilities of a school health advisory committee might include:

- Assessing school health program needs and making recommendations for maintaining a safe and healthy school environment
- Program planning, including curriculum development and review and staff training programs
- Coordinating health care and emergency response plans and protocols
- Directing intervention activities, including initiating district policies and procedures on specific school health and safety-related topics
- Fiscal planning, including advocating for district and outside financial resource support for school health programs
- Information sharing and advocacy such as district, school and community health information collection; presentations on priority health topics; presentations on school health program impact on health and academic achievement; and identification of school health program strengths and weaknesses
- Acting as a liaison between the school district and community health agencies and organizations

The ***Hayward Community School District*** has used a comprehensive school health committee in district decisionmaking since 1996. According to Sue Gardner, committee chair and the district's comprehensive school health coordinator, "Our committee was established to support the development of healthy, resilient and successful learners, to show the connection between health and academic achievement, and to provide building ownership in comprehensive school health."

The committee helps to promote safe and healthy schools. "It provides communication

between county agencies and the school and between buildings within the district for comprehensive school health programming.” said Gardner. Specifically, the committee reviews building level needs assessments; makes recommendations for curriculum, student programs, staff training and related school district policies; previews resources; and assists in evaluation of programming. The committee not only provides input on health and safety programming to the district but also to local agencies.

While the district’s comprehensive school health advisory committee deals with a broad range of health and safety topics, the district also has another advisory committee that focuses on a related matter - the district’s character education initiative. The goal of the character education committee is to help students become caring, contributing, healthy, productive and responsible citizens. The work of the two committees is aligned in the district said Gardner.

The *Eau Claire Area School District* has had a school-community health and safety advisory council since 1994. The council originated from the district’s human growth and development advisory committee.

The council provides support for student achievement by facilitating communication, coordination and monitoring of youth health and safety activities in the schools and community. Specifically, it provides:

- a venue for presenting information and data on priority youth health issues to school and community health and safety advocates;
- an entity for health and survey oversight and information gathering;
- a sounding board for school or community health and safety initiatives;
- an umbrella entity that offers guidance and feedback on school programs and policies such as alcohol, tobacco and other drug (ATOD) abuse, violence and harassment, human growth and development, positive

youth development and other priority topics; and

- an opportunity for ongoing planning and assessment of youth health and safety activities.

The specific roles and responsibilities of the council vary from year to year. According to Jean Christenson, council co-chair and the district’s ATOD prevention coordinator, the council’s primary focus areas are school violence prevention/safety, alcohol, tobacco and other drug abuse, and health education. The council also aligns its work with related work of other school district advisory groups. For example, the advisory group addressing individuals with special health needs.

“So many health and safety issues are ‘touchy’ issues for families and the community. The council helps bridge the communication gap between the school and community through collaborative health and safety planning,” said Christenson.

The *Deerfield Community School District* has established a comprehensive school health and wellness advisory committee for the purpose of:

1. monitoring the implementation of the district’s health and wellness policies,
2. evaluating the progress of related goals,
3. serving as a resource to school sites,
4. planning special events and incentives, and
5. recommending policy revisions as necessary.

This committee is a permanent board committee.

## COMMITTEE MEMBERSHIP AND OPERATION

Once the district has determined the role and purpose of the school health advisory committee, it should determine its size and membership. The committee should be kept a

manageable level. Usually they have between 10 and 20 members. Some are larger and some are smaller based on district needs, interests and resources. School officials should keep in mind that additional individuals could serve in an advisory capacity to the committee on specific health-related topics (for example, the local asthma coalition could serve in an advisory capacity when the committee is considering asthma management in the schools).

It is important to include individuals on the school health advisory committee who:

1. **Have professional knowledge and expertise** regarding health-related issues and the needs of children. For example, the school nurse, health educators, medical professionals, representatives of local public health agencies, family service agencies, community youth and health organizations.
2. **Have an interest** in school health and wellness issues.
3. **Are aware of community needs, interests, values and requirements and are representative of the school community.** Having these people on the committee helps develop plans/policies that are appropriate for the community and helps facilitate goal accomplishment. They can enrich the discussion and promote community support for district actions.
4. **Will be affected by decisions that are made or will be responsible for implementing school health-related policies and procedures within the schools.** If these individuals are not involved, actions may be difficult to enforce and may not be supported within the schools.

Each person brings their own expertise, skills and experiences to the process. Districts should include individuals on the committee who can look at issues from different points of view.

Committee members should be willing to study the issues, keep in mind district needs, values and resources, and provide clear direction for improving health and safety in the schools and community.

School officials should determine the term lengths of committee members and rotate them in a way that protects the stability and consistency in operations of the committee.

As with any advisory group in the district, it is important to identify an individual(s) to lead the school health advisory committee and facilitate committee meetings and activities. The person selected to lead the committee should be someone who has the personal characteristics to run positive and productive meetings and someone who understands the general organization of the school and community.

Also be aware that, as with other board-established committees, school health advisory committees are subject to requirements of the Open Meetings Law.

The *Deerfield School District's* school health and wellness advisory committee consists of seven people - a school board member (who chairs the committee), the district's business manager/food service supervisor, an administrator, school nurse, a student, a parent and a staff member(s).

The *Hayward Community School District's* comprehensive school health committee consists of 21 members including the comprehensive school health coordinator (chair), a school board member, teacher representatives from each grade level and school, guidance counselors, a school nurse, buildings and grounds staff representative, food service staff representative, the police liaison officer, UW-Extension 4-H representative, local law enforcement officer, a representative from Sawyer County health and human services, and representatives from the Wisconsin Nutrition Program and NW Connection Family Resources.

When deciding who to be on the committee, the district looked at the needs of local agencies, staff willing to volunteer to be on the committee, and representation from different buildings and departments/areas. "It is important to include

agencies that are supportive of comprehensive school health programming and are contributing partners and to include a member of the school administration and school board on the committee," said Gardner.

Mark Kelsey, school board member representative on the committee who also happens to be a police detective, believes the make up of the committee contributes to its value and effectiveness in district decisionmaking. "The members of the committee bring a lot of fresh ideas to a wide variety of issues facing our district. Because we all come from various backgrounds and disciplines, we are able to brainstorm issues with each other and come up with some innovative ideas on how to address them," said Kelsey.

There are no specific term lengths for committee members. According to Gardner, "Staff rotate off when they no longer want to volunteer to be on the committee or when they want to give someone else a chance to participate and represent a building." The district has been fortunate to have a very stable committee. "Lack of turnover of committee members has been positive for building on past action plans", said Gardner, "Committee members are committed to carrying out the goal of the comprehensive school health program."

Gardner said the comprehensive school health committee meets three times a year for approximately three hours for "planning, program updating and evaluation". At each meeting, agency/department updates are shared with the group and there is time set aside to discuss school building issues. Some of the topics addressed by the committee include health, alcohol and other drug abuse, at-risk behaviors, safety, nutrition, wellness and grant objectives.

The school-community health and safety advisory council in the *Eau Claire Area School District* consists of approximately 20 members providing representation from the school district, private schools, parents, service providers and public agencies. Christenson said membership is recruited from many sectors, representing the diversity of the community and several key

community sectors. Membership is for three years and is on a rotating basis.

School district representatives include three principals, the curriculum supervisor, the at-risk supervisor, the ATOD prevention coordinator, the health education coordinator, a school counselor, an early childhood representative and a school board member.

Community representatives include a representative of the department of health and family services, a private school representative, a school nurse/community nurse, private non-profit health providers, representatives from city and county law enforcement agencies, parents, youth ministers from major religious groups in the community, youth coalition project coordinator, and representatives from other community organizations (e.g., Big Brothers/Big Sisters, family resource center).

The entire council meets twice a year, said Christenson. Meetings are normally held during the day and usually last for two hours. Emergency meetings may be held if necessary.

The advisory council functions similar to other citizen advisory committees in the district according to board policy and administrative rules. The council is an advisory body rather than the ultimate decision-making body. Council members receive a written charge describing the council's purpose, scope of authority and means of reporting. Council recommendations are arrived at by informal consensus, not by vote, unless a written record is required. Communication with the media and with the public follows existing district channels (from the council through the administration).

## COMMITTEE RESOURCES

School health advisory committees should be encouraged to draw upon a wide variety of resources both inside and outside the district when making school health and safety-related policy and program recommendations. Recommendations should be based on appropriate research and supportive data.

Resources should include not only available written materials but also individuals and organizations/agencies who can offer knowledge and expertise regarding specific topics. For example, the Department of Public Instruction (DPI - <http://dpi.wi.gov/sspw/cshp.html>), Wisconsin Division of Public Health, local public health agencies, local hospitals/clinics, county UW-Extension staff, county health and family services staff, community coalitions/task forces.

Issues of *The FOCUS* may also be helpful to school health advisory committees in doing their work, including past issues on such topics as employee and student wellness (5/07 and 10/03), food allergies (12/06), planning for the pandemic flu (6/06), sexual harassment (1/06), protecting children from sexual predators (5/05), weapons and the schools (2/05), providing a healthy school environment (4/04), sex education (3/04) and bullying (1/03). Past issues are now available to *FOCUS* subscribers online via WASB's website (<http://www.wasb>).

Multiple resources are made available to the comprehensive school health committee in the *Hayward Community School District*, according to Gardner. The district provides the comprehensive school health coordinator as a resource to the committee and also provides secretarial support. Community agency partnerships provide resources and programming for school building action plans, and the district receives technical support and resources from the DPI.

## EVALUATION/ACCOUNTABILITY

The school board and/or administration should make sure the school health advisory committee understands district expectations regarding internal and external communications. How will committee recommendations/actions be reported to the administration and/or school board and reported to the public, district staff and others?

In the *Hayward Community School District*, minutes of all comprehensive school

health committee meetings and building action plans are submitted in writing to the administration and school board. In addition, committee activities and school action plans are communicated to the public, staff and others through quarterly comprehensive school health newsletters, local newspaper articles, and school board presentations/reports on comprehensive school health.

School officials should also provide for ongoing evaluation of the school health advisory committee and its action plans. The primary purpose of evaluation is to check on the progress of school health and safety plans and to determine whether the committee's work is having a positive impact. Committee members will be motivated by knowing that they are making a difference in their schools and community.

Some questions districts may want to consider when evaluating the effectiveness of school health advisory committees and their action plans are listed below:

- Does the school health advisory committee regularly generate sound advice and activities to support safe and healthy schools?
- Is the school health advisory committee recognized as a valuable asset in promoting the health and safety of students and staff?
- Is there a recent history of the school board and/or administration seeking advice from the school health advisory committee and acting on committee recommendations?
- Does the school health advisory committee membership reflect varying viewpoints and represent the diversity of the community?
- Do school health advisory committee members understand what is expected of them?

- Are regularly scheduled meetings occurring with most members attending?
  - Is the school health advisory committee given sufficient information and time to study and discuss issues before making recommendations?
  - Does a positive relationship exist between the school health advisory committee and school personnel and community partners?
  - Are members willing to make the necessary time commitment to support the school health program?
- The comprehensive school health coordinator evaluates programming and tabulates trends in at risk behaviors and disciplinary referrals. Student survey data is recorded and reviewed.
  - The consolidated plan team for school improvement (Title I coordinator/reading specialist, technology director, director of instruction and comprehensive school health coordinator) evaluates the district's goal for safe and healthy schools as it relates to overall student learning and school improvement.

These evaluations are used in planning and program updating activities.

The district believes the comprehensive school health committee has been effective and worthwhile. "It has provided flexibility of programming and action plans for each building in the district," said Gardner.

Board Member Kelsey also believes the committee has been effective, and strongly encourages other districts to use health advisory committees in district decisionmaking. "You simply cannot identify issues, form a plan of attack and set the plan in motion effectively without the help of a dedicated health and safety committee." He said it also helps to have a dedicated staff member like Gardner to lead the effort.

In the *Hayward Community School District*, comprehensive school health advisory committee members evaluate their action plans each year on a written form. Also, comprehensive school health action plans and activities are evaluated as follows, according to Gardner:

- The director of food services evaluates breakfast and lunch programs.
- The buildings and grounds director evaluates safety on school campus.



# POLICY PROCESSES AT WORK

## COMPREHENSIVE SCHOOL HEALTH-RELATED POLICY TOPICS

The Wisconsin Comprehensive School Health Program (CSHP) framework is composed of six components that are used to organize and implement an effective school health program. The six components, along with a few examples of related policy topic areas, are listed below.

### Healthy School Environment

Equal Educational/Employment Opportunities  
Student and Employee Harassment/Bullying  
Student Conduct/Discipline  
Alcohol and Other Drug Abuse  
Threats to or by Students  
Gang-Related Behavior  
Internet Safety and Acceptable Use  
Tobacco Use on School Premises  
Weapons on School Premises  
Bomb Threats  
Supervision of Students  
School Safety Patrols  
Staff Hiring (including criminal background checks)  
Safety Program  
Building and Grounds Inspections  
Accident Reports  
Visitors to the School  
Emergency Response Plans  
Buildings and Grounds Security  
Emergency Nursing Services  
Communicable Disease Control  
Animals in the Schools  
Indoor Air Quality Management  
Student Transportation Services  
Food Services Management

### Curriculum, Instruction and Assessment

School District Educational Philosophy/Mission  
Character Education/Core Values

Health and Nutrition Education  
Physical Education  
Human Growth and Development  
Protective Behaviors /Conflict Resolution  
Teaching About Drugs, Alcohol and Tobacco  
Multicultural Education

### Student Programs

Student Assistance Program  
Suicide Prevention/Intervention Program  
Programs for Children at Risk  
School-Age Parent Programs

### Adult Programs

Employee Assistance Program  
Employee Wellness Program  
Employee Training/Inservice Programs

### Pupil Services

Guidance and Counseling Services  
Peer Mediation  
Administering Medication to Students  
Health Services for Students with Special Needs  
Reporting Child Abuse/Neglect

### Family and Community Connections

Citizen Involvement in Decision Making  
Citizen Advisory Committees  
School Volunteers  
After-School Programs  
Public Information Program  
Parent Involvement  
Parent-Teacher Conferences  
Student Records  
Access to Public Records  
News Media Relations  
Relations with Parents/Parent Organizations  
Relations with Churches  
Relations with Law Enforcement Agencies  
School-Police Liaison Programs  
Relations with Family Services Agencies  
Relations with Health Authorities  
Relations with Local Emergency Agencies



## **POLICY SERVICES**

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WASB Code: **252.1**

EPS Code: **CEA**

### **SCHOOL HEALTH ADVISORY COUNCIL**

In an effort to provide safe and healthy school environments and to address school health-related issues in a systematic manner, the School Board supports the establishment and use of a School Health Advisory Council in the District. The general purpose of the Council is to study, research, discuss and make recommendations to the Superintendent and School Board regarding school health-related policies, programs and activities. *{If a district wants to list the specific roles and responsibilities of the School Health Advisory Council in school board policy, they should be listed following this paragraph.}*

The School Health Advisory Council shall serve in an advisory capacity only and shall have no power to take action whatsoever or to commit the District to any course of action except as specifically directed by the Superintendent or Board.

The School Health Advisory Council shall be appointed by the Superintendent and include the school nurse (or public health nurse serving the school); representation from the teaching staff, school administration, pupil services staff and school support staff; and, other individuals from the school and community with knowledge and expertise regarding health-related issues and the needs of children. The Superintendent may also appoint parent, student and other representatives to the Council as he/she deems appropriate. Membership shall be set up on a rotation basis so as to protect stability and consistency in operations of the Council.

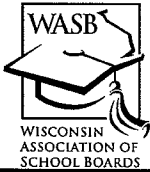
The Superintendent shall ensure that Council members are informed regarding the specific roles and responsibilities of the Council and its relationship to the Board and administration, any limitations on the work of the Council, and any operating and reporting procedures that must be followed.

The School Health Advisory Council shall report periodically to the Superintendent regarding Council activities. Council recommendations for school health policies, programs and activities shall be made to the Superintendent in writing. Any recommendations requiring Board action (e.g., policy changes) shall be referred to the Board. All recommendations made by the School Health Advisory Council shall be based upon appropriate research and supportive data.

**SOURCE:** Wisconsin Asthma Management in the Schools Team - AASA/NSBA  
Leadership Forum for Healthy Students and Healthy Schools *(includes representatives from WASB, WASDA, DHFS and DPI)*

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## POLICY SERVICES

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WASB Code: 252.1-Exhibit

EPS Code: CEA-E

### TEMPLATE TO USE IN ESTABLISHING AND USING SCHOOL HEALTH ADVISORY COUNCIL IN THE DISTRICT

#### I. Council Membership

**A. Determine the categories of individuals to be represented on the Council:**

*(Keep in mind the purpose of the Council and its assigned roles and responsibilities. Include individuals knowledgeable about the subjects being discussed by the Council, interested in the subjects, those who may be affected by decisions that are made, and those who will be responsible for implementing school health-related policies and procedures within the schools.)*

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**B. Identify any existing school health and safety-related committees or councils operating in the district:** *(These committees/councils may include individuals you would like to include on the Council. They may be able to be dissolved and their tasks reassigned to the Council. Examples of such committees include, Human Growth and Development Advisory Committee, Wellness Committee, School Safety Committee)*

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**C. Determine how Council members will be appointed, their term lengths and who will lead Council meetings and activities:**

**How will Council members be appointed and by whom will they be appointed?**  
*(Will members be appointed in a similar manner as other advisory committees in the district, or in a different manner?)*

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**What term length will Council members be appointed to serve?** *(Term lengths should be rotated to protect the stability and consistency in operations of the Council)*\_\_\_\_\_

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**Who will chair the Council and facilitate Council meetings and activities?** *(Will the Council chair be designated at the time the Council is appointed or will the Council itself select a chair?)* \_\_\_\_\_

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## **II. Roles and Responsibilities of School Health Advisory Council**

**A. Define General Purpose and Authority of the Council:** *(Why is the district establishing a School Health Advisory Council and how will it be used in district decision making? What authority does the Council have within the district? Remember that the Council is to serve in an advisory capacity to the Superintendent and/or School Board and does not have any final decision making authority in the district.)*\_\_\_\_\_

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**B. Determine specific roles and responsibilities of the Council within the district:** *(What specific tasks will be assigned to the Council? Will the Council deal with all health-related issues confronting the schools, or will its focus be more narrow?)*\_\_\_\_\_

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**C. Determine how Council reports and recommendations will be made to the Superintendent and/or School Board and the appropriate flow of communication between the Council and members of the school community:** *(Will reports be required to be made on regular basis regarding Council activities or only when the Council has specific recommendations to make regarding school health-related policies, programs or activities?)*\_\_\_\_\_

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**D. Clarify Council Operating Procedures (e.g., frequency of meetings, agenda preparation and dissemination, voting procedures):** *(Will these procedures be clarified at the time of Council appointment or will the Council itself determine its operating procedures?)*\_\_\_\_\_

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### III. COUNCIL RESOURCES

**What resources will the Council have access to when conducting Council activities and when making school health-related policy and program recommendations for the district?** *(Identify any known resources that may be helpful to the Council when performing their assigned tasks and in addressing specific school health-related topics (e.g., alcohol and other drug use, asthma management in the schools, food allergies, human growth and development instruction, communicable disease control, emergency response plans, student nutrition and physical activity))*

**District resources:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Community resources:** \_\_\_\_\_  
\_\_\_\_\_  
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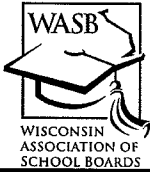
**Other resources:** \_\_\_\_\_  
\_\_\_\_\_  
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### IV. COUNCIL EVALUATION

**Provide for an evaluation of the Council's performance in relation to its assigned tasks and applicable district policy.** *(Will the Council itself be required to evaluate its performance on a regular basis and to include information regarding the evaluation in reports to the Superintendent/Board, or will the Council's performance be evaluated on a regular basis by the Superintendent and/or School Board?)* \_\_\_\_\_  
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**SOURCE:** Wisconsin Asthma Management in the Schools Team - AASA/NSBA Leadership Forum for Healthy Students and Healthy Schools *(includes representatives from WASB, WASDA, DHFS and DPI)*

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**POLICY SERVICES**

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**WASB Code: 252**

**EPS Code: CE**

**ADMINISTRATIVE COMMITTEES AND COUNCILS**

The Superintendent of Schools may create committees, councils and other advisory groups for the purpose of developing school programs, implementing School Board policies or for whatever other purpose the Superintendent or Board deems necessary.

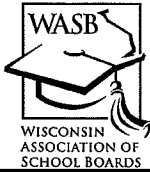
All committees and councils created by the Superintendent are advisory in nature and shall include in writing the following elements: a statement of purpose, a listing of membership and a method for reporting.

CROSS REF: Administrative Committees and Councils Guidelines

**SOURCE: GREEN BAY AREA PUBLIC SCHOOL DISTRICT**

**APPROVED: August 23, 2004**

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**POLICY SERVICES**

122 W. Washington Avenue, Suite 400  
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WASB Code: **252-Rule**

EPS Code: **CE-R**

**ADMINISTRATIVE COMMITTEES AND COUNCILS GUIDELINES**

Committees, councils and other advisory groups created by the Superintendent will be provided a statement of purpose and will have information provided regarding the method of reporting the group's progress and findings.

Committees, councils and other advisory groups will be expected to follow effective group practices under the facilitation of an assigned individual(s). The parameters identified in the district's Strategic Plan should serve as a framework for how these groups operate. These parameters are as follows:

**A Focus on Children and Learning**

- The district's highest priority will be on student learning and the general welfare of students.

**Professional Relationships/Organizational Culture**

- The dignity of all individuals will be respected.
- Participative leadership and collaboration will be practiced at all levels of the district.
- Risk taking and creativity will be encouraged and celebrated in order to stretch ourselves.
- Employees will be empowered to question if areas of work and related initiatives are aligned to the Strategic Plan.
- Ongoing development for all employee groups will be planned and implemented in a systematic manner.

**Communication**

- Effective communication and partnerships throughout our district and community will be utilized to ensure effective planning and program implementation.

**Continuous Improvement**

- The need for continuous improvement will be embraced with related strategies based on effective practices.

**Resources**

- Effective stewardship regarding all district resources will be ensured in our work.

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- The district will make effective use of technology to enhance learner outcomes by providing information systems, infrastructure and support.

Any final curriculum proposal requiring approval by the School Board will include a listing of membership, and the membership will be provided an opportunity to serve as a signatory of the report indicating support for the report findings/recommendations. Members of these committees will also be accorded an opportunity to file a minority report indicating that the involved individual(s) does not support the report findings/recommendations.

When committees, councils and advisory groups are formed by the Superintendent, attention will be paid to ensure adequate representation for the assigned task.

The findings of assigned committees, councils or other advisory groups will be communicated as indicated in the method of reporting. Upon receipt of the findings/recommendations, the Superintendent, with designated staff, will review the related reports and determine the next step of action.

**SOURCE: GREEN BAY AREA PUBLIC SCHOOL DISTRICT**

**APPROVED: August 23, 2004**



## **POLICY SERVICES**

122 W. Washington Avenue, Suite 400  
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**WASB Code: 884**

**EPS Code: KNAF**

### **RELATIONS WITH HEALTH AUTHORITIES**

The Board of Education encourages school district staff to work with local, county and state health departments to:

- a. maintain a safe and healthful school environment;
- b. promote the good health of students and their families;
- c. educate students in preventive medicine and good health practices; and
- d. help students develop a sense of responsibility for personal and community health.

**SOURCE: OSHKOSH AREA SCHOOL DISTRICT**

**Sample policies are distributed for demonstration purposes only.  
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